BEST AVAIL

	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		E	BEST .	AVAI	LABLE (C	OPY	<u></u>	•.		
	PATENT	APPLICATI Effe	ON Fcc [DETERM ber 1, 2	///NAT 001	ION RECO)RI	D [-	0 ocket Nu	
·		CLAIMS A	S FILED - PART I (Column 1) (C			olumn 2)		SMALL E				R THAN
TOTAL CLAIMS								RATE	FEE	-	RATE	
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC FE		-	BASIC FE	FEE
TOTAL CHARGEABLE, CLAIMS			7 m	7 minus 20= *				X\$ 9=	425	=		89 d
INDEPENDENT CLAIMS				*				-	-	OR	 	
MULTIPLE DEPENDENT CLAIM PI								X42=		OR	X84=	
								+140=		OR	+280=	
- 1	Tithe differenc	e in column 1 is	s less than z	ero, ente	r " 0" in	"0" in column 2		TOTAL		OR	TOTAL	890
	(AMENDE	MENDED - PART II							OTHER THAN	
-		(Column 1)	Service	(Colur		(Column 3)		SMALL		OR	SMALL	
MENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= -		X\$ 9=	-	OR	X\$18=	
YME.	Independent	<u> </u>	Minus	***		=		X42=		1 1	X84=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7,12		OR	7.04=	
	• . • •					e e e e e e e e e e e e e e e e e e e		+140=		OR	+280=	
								TOTAL ADDIT: FEE	· .	OR A	TOTAL ADDIT. FEE	
		(Column 1)	MC PANCETTE	(Colun		(Column 3)	•	1	* - * *			
ENI B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	_ADDI- TIONAL FEE
MENDW	Total	*	Minus	**		= .		X\$ 9=	•	OR	X\$18≒.⁻	,
Z Z	Independent	<u> </u> *	Minus	***		=	-	X42=		ait.	X84=	7
_	HIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		ŀ		• • • •	OR		
		•					L	+140=	مىر يە ئىلدىن <u>ئەندىلەردىن ئالدىن</u>	OR	+280=	
TOTAL AGONT PEEL										م ا	TITT	
7		(Column 1) CLAIMS		(Colum		(Column 3)	_		<u></u> .	·	(Celturn	1)
		REMAINING AFTER T AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA		RATE-	ADDI- FIONAL FEE		RATE	ADDI-
5	Total		Minus	7.4		=	-	λ\$ s≅= {	: :	00	/:\$18=	1 1
	Independent	*	Minus	*** .		=	-	X42- =		OR fat	7	

† †	4	3									
٠,		(Column 1)		(Column 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA						
20	Total	•	Minus	7.4	-						
AMENDME	Independent	*	Minus	***	=						
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Continues and the same

OR

OR

+280=

ADDIT, FEE

TOTAL

+140=

ADDIT, FEE-

TOTAL

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter *20."